

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE APPLICATION OF: Haruki TODA

SERIAL NO: 10/551,702

GAU: 2815

FILED: September 30, 2005

EXAMINER: VALENTINE, JAMI

FOR: PHASE CHANGE MEMORY DEVICE



COMMISSIONER FOR PATENTS
ALEXANDRIA, VIRGINIA 22313

INFORMATION DISCLOSURE STATEMENT UNDER 37 CFR 1.97

SIR:

Applicant(s) wish to disclose the following information.

REFERENCES

- ☒ The applicant(s) wish to make of record the reference(s) listed on the attached form PTO-1449. Copies of the listed reference(s) are attached, where required, as are either statements of relevancy or any readily available English translations of pertinent portions of any non-English language reference(s).
- ☒ A check or credit card payment form is attached in the amount required under 37 CFR §1.17(p).

RELATED CASES

- ☐ Attached is a list of applicant's pending application(s), published application(s) or issued patent(s) which may be related to the present application. In accordance with the waiver of 37 CFR 1.98 dated September 21, 2004, copies of the cited pending applications are not provided. Cited published and/or issued patents, if any, are listed on the attached PTO form 1449.
- ☐ A check or credit card payment form is attached in the amount required under 37 CFR §1.17(p).

CERTIFICATION

- ☐ Each item of information contained in this information disclosure statement was first cited in any communication from a foreign patent office in a counterpart foreign application not more than three months prior to the filing of this statement.
- ☐ No item of information contained in this information disclosure statement was cited in a communication from a foreign patent office in a counterpart foreign application or, to the knowledge of the undersigned, having made reasonable inquiry, was known to any individual designated in 37 CFR §1.56(c) more than three months prior to the filing of this statement.

DEPOSIT ACCOUNT

- ☒ Please charge any additional fees for the papers being filed herewith and for which no check or credit card payment is enclosed herewith, or credit any overpayment to deposit account number 15-0030.

Respectfully submitted,

OBLON, SPIVAK, McCLELLAND,
MAIER & NEUSTADT, P.C.

A handwritten signature in cursive script, appearing to read "Eckhard H. Kuesters".

Eckhard H. Kuesters

Registration No. 28,870

Customer Number

22850

Tel. (703) 413-3000
Fax. (703) 413-2220
(OSMMN 05/03)

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Surinder Sachar

Registration No. 34,423

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